

**BUTTE COUNTY PUBLIC HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD PROGRAM OFFICIAL INSPECTION REPORT**

|   |                   |                                     |
|---|-------------------|-------------------------------------|
| <b>DBA/NAME</b> Mi Pueblito                           |                   | <b>DATE</b> 11-6-07                 |
| <b>ADDRESS</b> 1950 E. 20 <sup>th</sup> Street, Chico |                   | <b>RECHECK DATE</b> 5+ days         |
| <b>OWNER/OPERATOR</b>                                 |                   | <b>SITE #</b> 2490                  |
| <b>MAILING ADDRESS</b>                                |                   | <b>CORRECT MAJOR VIOLATIONS BY:</b> |
| <b>INVENTORY TYPE</b> 16F-23                          | <b>SERVICE</b> 03 | <b>CORRECT MINOR VIOLATIONS BY:</b> |

See reverse side for the code sections and general requirements that correspond to each violation listed below

**In = In Compliance**      **N/O = Not Observed**      **N/A = Not Applicable**      **OUT = Out of Compliance**  
**COS = Corrected On-Site**      **MAJ = Major Violation**

| IN   | N/O | N/A | DEMONSTRATION OF KNOWLEDGE                                      | COS | MAJ | OUT | IN  | N/O | N/A | PROTECTION FROM CONTAMINATION   | COS | MAJ | OUT |
|--|-----|-----|---|-----|-----|-----|---|-----|-----|---|-----|-----|-----|
|  |     |     | 1. Demonstration of knowledge; food safety certification        |     |     | X   | X   |     |     | 12. Proper procedures followed for returned and reserve of food                             |     |     |     |
| <b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>  |     |     |   |     |     |     | X   |     |     | 13. Food in good condition, safe and unadulterated  |     |     |     |
| X  |     |     | 2. Communicable disease; reporting, restrictions & exclusions   |     |     |     | X   |     |     | 14. Food contact surfaces: clean and sanitized  |     |     |     |
| X  |     |     | 3. No discharge from eyes, nose, and mouth                      |     |     |     | <b>Sanitizer Type:</b> <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Hot Water <input type="checkbox"/> Other<br><b>Sanitizer Concentration (ppm):</b> |     |     |   |     |     |     |
| X  |     |     | 4. Proper eating, tasting, drinking or tobacco use              |     |     |     | <b>FOOD FROM APPROVED SOURCES</b>   |     |     |   |     |     |     |
| X  |     |     | 5. Hands clean and properly washed; gloves used properly        |     |     |     | X   |     |     | 15. Food obtained from approved source  |     |     |     |
| X  |     |     | 6. Adequate handwashing facilities supplied & accessible        |     |     |     |   |     | X   | 16. Shell stock with completed tags, in good condition, properly stored/displayed           |     |     |     |
| <b>TIME AND TEMPERATURE RELATIONSHIPS</b>  |     |     |   |     |     |     |   |     | X   | 17. Compliance with Gulf Oyster Regulations   |     |     |     |
| X  |     |     | 7. Proper hot and cold holding temperatures                     |     |     |     | <b>CONFORMANCE WITH APPROVED PROCEDURES</b>   |     |     |   |     |     |     |
|  |     | X   | 8. Time as a public health control: Proper procedures & records |     |     |     |   |     | X   | 18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan   |     |     |     |
| X  |     |     | 9. Proper cooling methods                                       |     |     |     | <b>CONSUMER ADVISORY</b>  |     |     |   |     |     |     |
| X  |     |     | 10. Proper cooking time & temperatures                          |     |     |     |   |     | X   | 19. Consumer advisory provided for raw or undercooked foods                                 |     |     |     |
| X  |     |     | 11. Proper reheating procedures for hot holding                 |     |     |     | <b>HIGHLY SUSCEPTIBLE POPULATIONS</b>   |     |     |   |     |     |     |
|  |     |     |   |     |     |     |   |     | X   | 20. Licensed health care facilities/ public & private schools; prohibited foods not offered |     |     |     |
| <b>SUPERVISION</b>   |     |     |   |     |     |     |   |     |     |   |     |     |     |
|  |     |     | 24. Person in charge present and performs duties                |     |     |     | <b>WATER/HOT WATER</b>  |     |     |   |     |     |     |
| <b>PERSONAL CLEANLINESS</b>  |     |     |   |     |     |     | X   |     |     | 21. Hot and cold water available  |     |     |     |
| 25. Personal cleanliness and hair restraints   |     |     |   |     |     |     | <b>LIQUID WASTE DISPOSAL</b>  |     |     |   |     |     |     |
| <b>GENERAL FOOD SAFETY REQUIREMENTS</b>  |     |     |   |     |     |     | X   |     |     | 22. Sewage and wastewater properly disposed   |     |     |     |
| 26. Approved thawing methods used, frozen food maintained frozen.  |     |     |   |     |     |     | <b>VERMIN</b>   |     |     |   |     |     |     |
| 27. Food separated and protected   |     |     |   |     |     |     |   |     |     | 23. No rodents, insects, birds, or animals  |     |     | X   |
| 28. Fruits and vegetables washed as required.  |     |     |   |     |     |     | <b>OUT</b>  |     |     |   |     |     |     |
| 29. Toxic substances properly identified, stored, used   |     |     |   |     |     |     | <b>OUT</b>  |     |     |   |     |     |     |
| <b>FOOD STORAGE/ DISPLAY/ SERVICE</b>  |     |     |   |     |     |     |   |     |     | 39. Thermometers provided and accurate  |     |     |     |
| 30. Food properly stored; food storage containers identified   |     |     |   |     |     |     | <b>PHYSICAL FACILITIES</b>  |     |     |   |     |     |     |
| 31. Consumer self-service facilities properly constructed and maintained   |     |     |   |     |     |     | 41. Plumbing: Plumbing in good repair, proper backflow devices  |     |     |   |     |     |     |
| <b>EQUIPMENT/ UTENSILS/ LINENS</b>   |     |     |   |     |     |     |   |     |     | 42. Garbage and refuse properly disposed; facilities maintained                             |     |     |     |
| 33. Nonfood contact surfaces clean and in good repair.   |     |     |   |     |     |     | 43. Toilet facilities: properly constructed, supplied, cleaned  |     |     |   |     |     |     |
| 34. Warewashing facilities: Adequate, maintained, properly used, test strips available   |     |     |   |     |     |     | 44. Premises; personal/cleaning items; vermin-proofing  |     |     |   |     |     |     |
| 35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity   |     |     |   |     | X   |     | <b>PERMANENT FOOD FACILITIES</b>  |     |     |   |     |     |     |
| 36. Equipment, utensils and linens: Properly stored and used   |     |     |   |     |     |     | 45. Floor, walls and ceilings: properly built, maintained in good repair, and clean   |     |     |   |     |     | X   |
| 37. Vending machines   |     |     |   |     |     |     | <b>SIGNS, MISC. REQUIREMENTS &amp; ENFORCEMENT</b>  |     |     |   |     |     |     |
| 38. Adequate ventilation and lighting; designated areas, use   |     |     |   |     |     |     | 46. No unapproved private homes/ living or sleeping quarters  |     |     |   |     |     |     |
| <b>NON-PERMANENT FOOD FACILITIES</b>   |     |     |   |     |     |     |   |     |     | 47. Signs posted; last inspection report available  |     |     |     |
| <b>REINSPECTION FEES</b>   |     |     |   |     |     |     |   |     |     | 48. Plan review required for new or remodel construction                                    |     |     |     |
| Reinspection fees will be charged for all subsequent reinspection unless an acceptable corrective time schedule has been submitted and approved by this Department. If, for any reasons beyond your control, you cannot correct the indicted violations by the next scheduled time, call this office prior to the inspection day. <input type="checkbox"/> |     |     |   |     |     |     |   |     |     | 49. Permits Available   |     |     |     |
| 202 Mira Loma Drive<br>Oroville, CA 95965<br>(530) 538-7281 or (530) 891-2727<br>www.buttecounty.net/publichealth/   |     |     |   |     |     |     |   |     |     | 50. Impoundment of unsanitary equipment or food   |     |     |     |
|  |     |     |   |     |     |     |   |     |     | 51. Permit Suspension   |     |     |     |
|  |     |     |   |     |     |     |   |     |     | 52. Other   |     |     |     |
|  |     |     |   |     |     |     |   |     |     | <b>NON-PERMANENT FOOD FACILITIES</b>  |     |     |     |
|  |     |     |   |     |     |     |   |     |     | 53. Mobile food facilities  |     |     |     |
|  |     |     |   |     |     |     |   |     |     | 54. Temporary food facilities   |     |     |     |

|                     |
|---------------------|
| <b>R.E.H.S.</b>     |
| <b>RECEIVED BY:</b> |
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|                                |                              |
|--------------------------------|------------------------------|
| <b>DBA/NAME Mi Pueblito</b>    | <b>DATE 11-6-07</b>          |
| Food Safety Cert Name: current | <b>Exp. Date: Sept. 2011</b> |
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**OBSERVATIONS AND CORRECTIVE ACTIONS**

- 23) Some dead and a few live cockroaches were observed in compressor compartments under equipment and in cracks/opening in walls. A pest control operator is reportedly working on problem. Contact pest control operator for additional treatment.
- 35) Clean sides, under, and inside areas of large equipment of food and misc. debris. Clean walk-in racks of residues and rust. Replace significantly rusty racks.
- 45) Clean floors in hard to reach areas of misc. debris.

Note: Most foods are cooked and cooled at main restaurant in adjacent county.